

# Work Assignment Content Listing

<b>Work Assignment Name:</b> COLBERT LANDFILL <b>EPA Work Assignment Number:</b> 439 Region # 10 <b>Work Assignment Status (circle one):</b> <u>Closed</u> <u>Ongoing</u> <b>Expended to date:</b> LOE _____ Dollars _____	<b>Date Checklist Completed:</b> By EPA _____ By Contractor _____ <b>EPA Contract Number</b> _____ <b>Contractor Name</b> _____ <b>Period of Performance</b> From: _____ To: _____
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## DOCUMENT CATEGORIES AND SUBCATEGORIES

	Contractor has Document (1)	EPA Regional Office has Document (2)	Comments (i.e. documents necessary to complete file. Use back of form if additional space is necessary)
<b>Category I - Work Assignment Documents</b>			
A Original work assignments and amendments (last amendment No. 3 ;missing amendments No.'s 2 )	X	A	_____
B Acknowledgements of amendment receipt by contractor		B	_____
C Work plans and revised work plans (Note revisions i.e. original, revision No.'s _____ )	X	C	_____
D Conflict of interest checks		D	_____
E Work assignment close-out information		E	_____
F Final work assignment status report log		F	_____
G Other:		G	_____
<b>Category II - Deliverables</b>			
A Draft final and final reports	X	A	_____
B Other written reports	X	B	_____
C Deliverable transmittal letters (date of last deliverable _____ )		C	_____
D Health and safety plans		D	_____
E QAPPs		E	_____
F Other:		F	_____
<b>Category III - Correspondence</b>			
A All WA correspondence (to and from subcontractors, vendors, EPA, others)		A	_____
B Phone memos		B	_____
C Meeting notes		C	_____
D Other:		D	_____
<b>Category IV - Background and Information Source Documents and Oversized Documents (where applicable)</b>			
A Copies of reports and data from federal agency files		A	_____
B Copies of reports and data from state and local agency files		B	_____
C Reference Materials		C	_____
D Maps, drawings		D	_____
E Logbooks, field notes		E	_____
F Custody forms		F	_____
G Aerial photos, other photos		G	_____
H Sampling and analysis plans		H	_____
I Microfilm, diskettes and others		I	_____
<b>Category V - Monthly Reports (all files)</b>			
A Technical Narratives (number of last monthly report _____ )		A	_____
B Financial Reports	X	B	_____



Note: Document categories are intended as a guide. Not all Work Assignments cover all categories and subcategories. Note on this form those categories and subcategories not applicable (NA) to specific Assignment.  
 (1) Contractor use this column. (2) EPA use this column.

## TES IV CONTRACT - DOCUMENT CONTROL LISTING

Report Date: 13-Sep-96

REGION: J10

WORK ASSIGNMENT NUMBER: 439

WORK ASSIGNMENT TITLE: COLBERT LANDFILL

CATEGORY	SEQ #	DATE	DOCUMENT SUBJECT/TITLE	AUTHOR NAME AND ORGANIZATION	ADDRESSEE NAME AND ORGANIZATION	PAGES	BOXNUMBER
			3 VOLUME APPENDIX			554	4
A1	0001	07/17/87	EPA APPROVAL SHEET AND SCOPE OF WORK WORK ASSIGNMENT ORDER	US EPA REGION X	JEG REGION X	2	4
A1	0002	09/10/87	WORK ASSIGNMENT APPROVAL WORK ASSIGNMENT AMENDMENT NO 1	NEIL THOMPSON US EPA REGION X	ROGER WILLIAMS JEG WASH DC	1	4
A1	0003	09/30/87	TO EXTEND PERIOD OF PERFORMANCE WORK ASSIGNMENT BLANKET AMENDMENT			3	4
A1	0004	02/08/88	TO CLOSE OUT WORK ASSIGNMENT WORK ASSIGNMENT AMENDMENT NO 3	US EPA REGION X		1	4
B1	0001	07/31/87	WORK PLAN AND COST ESTIMATE RE PRP SEARCH WORK PLAN W/LETTER	LLOYD REED JEG REGION X	ROGER WILLIAMS JEG WASH DC	18	4
B1	0002	08/14/87	WORK PLAN AND COST ESTIMATE RE PRP SEARCH WORK PLAN W/LETTER	ROGER WILLIAMS JEG REGION X	JACK JOJKIAN US EPA REGION X	15	4
G2	0001	12/10/87	SUGGESTING LIABILITY OF KEY TROMICS CORP & SPOKAN EPA MEMEO W/VARIOUS DOCUMENTS	LYNN PAXSON JEG REGION X	NEIL THOMPSON US EPA REGION X	52	4
H1	0001	11/04/87	QUALITY ASSURANCE REVIEW OF PRP SEARCH REPORT NOTES	MELL ROY JEG REGION VIII	LLOYD REED JEG REGION X	44	4
N1	0001	10/21/87	PRP SEARCH FOR COLBERT LANDFILL SPOKAN, WA DRAFT REPORT W/LETTER	LLOYD REED JEG REGION X	NEAL THOMPSON US EPA REGION X	61	4
Total Pages						751	



TES4-J10-0439-A1-0001

(10)<sup>2</sup>

# **ENVIRONMENTAL PROTECTION AGENCY** **Technical Enforcement Support at Hazardous Waste Sites**

<b>APPROPRIATION:</b> <input type="checkbox"/> CERCLA <input type="checkbox"/> RCRA <input type="checkbox"/> Other Funding Acct. No. _____	<b>TES NO.</b> <u>IV</u> Contract No. <u>62-01-7351</u> Prime Contractor Name <u>Jacobs Engineering</u>	<b>WORK ASSIGNMENT NO.</b> <u>439</u> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment No. _____ Priority: <input type="checkbox"/> Normal <input type="checkbox"/> Expedite* <input type="checkbox"/> Emergency*																								
<b>SITE/FACILITY:</b> <u>Colbert Landfill</u> <u>Spokane County</u> <u>WA</u> <u>10</u> <small>or Project Name Site/Facility Location (City or County) State Region/HQ</small> NPL Site: <input checked="" type="checkbox"/> Final or Proposed List <input type="checkbox"/> No RCRA Facility: <input type="checkbox"/> Yes <input type="checkbox"/> No Facility ID# _____ Site Acct. #: _____ SCAP Activity Link: <u>013</u>																										
<b>PURPOSE:</b> <input checked="" type="checkbox"/> Initiate New Work Assignment <input type="checkbox"/> Work Plan Approval** <input type="checkbox"/> Disapprove Work Plan (Contractor will immediately stop work) <input type="checkbox"/> Work Plan Revision: ( <input type="checkbox"/> SOW <input type="checkbox"/> Cost/Hours) <input type="checkbox"/> Closeout Work Assignment (All final deliverables received)																										
<b>STATEMENT OF WORK SUMMARY (SOW)</b> (Attach a <u>Detailed</u> SOW) (See Reporting Requirements): Task Type <u>ESP Search</u> Task No.: _____ <small>(Must identify task type and number according to TES User's Guide to show activity is within the overall TES contract SOW)</small> Summary/Comments: _____																										
<b>BASE PERIOD</b> <table style="width:100%;"> <tr> <th></th> <th>LOE</th> <th>Cost/Fee</th> </tr> <tr> <td>Previously Approved</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>This Action</td> <td><u>(b)</u></td> <td><u>(b) (4)</u></td> </tr> <tr> <td>Total</td> <td><u>(b)</u></td> <td><u>(b) (4)</u></td> </tr> </table>		LOE	Cost/Fee	Previously Approved	_____	_____	This Action	<u>(b)</u>	<u>(b) (4)</u>	Total	<u>(b)</u>	<u>(b) (4)</u>	<b>OPTION PERIOD</b> (Authorized only if contract option is exercised) <table style="width:100%;"> <tr> <th></th> <th>LOE</th> <th>Cost/Fee</th> </tr> <tr> <td>Previously Approved</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>This Action</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Total</td> <td>_____</td> <td>_____</td> </tr> </table>		LOE	Cost/Fee	Previously Approved	_____	_____	This Action	_____	_____	Total	_____	_____	TES II: Use Option Column TES III & IV: Base period ends 9/30/87. Any work required after that date should appear in option column.
	LOE	Cost/Fee																								
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This Action	_____	_____																								
Total	_____	_____																								
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<small>(Do not include clerical or Expert Witness hours in the LOE estimate. Expert Witness costs are considered "Other Direct Costs." Estimate the Expert Witness hours in the attached Scope of Work.)</small>																										
No. of Pages to Follow _____ Reference Info.: <input type="checkbox"/> Attached <input type="checkbox"/> Transmitted Separately <input type="checkbox"/> Pickup From _____ <small>(Including SOW)</small>																										
<b>REPORTING REQUIREMENTS:</b> <input type="checkbox"/> Briefing(s) <input checked="" type="checkbox"/> Letter Report <input type="checkbox"/> Draft Report <input type="checkbox"/> Final Report*** <input type="checkbox"/> Other Deliverables are to be marked ENFORCEMENT CONFIDENTIAL: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <small>Reporting requirements and deliverables may differ for each TES contract. Include in the SOW a schedule for deliverables. If the number of reports required for your deliverables differs from the contract's normal requirement, request that in your SOW.</small>																										
<b>INITIATOR:</b> <u>Nail Thompson</u> Primary Contact <u>EPA Region 10, Seattle, WA</u> Address <u>James M. Iverts</u> <b>CONCURRENCE:</b> <u>James M. Iverts</u> Regional Contact <b>APPROVAL:</b> _____ Project Officer (HQ TES P.O.) <u>819402</u> Contracting Officer <b>CONTRACTOR ACKNOWLEDGEMENT OF RECEIPT:</b> <u>Robert Miller</u> Signature and Title	<u>6/13/87</u> Date Phone no. <u>399-7177 (206) 442-7177</u> FTS Off-NET <u>7/1/87</u> Date <u>7/7/87</u> Date <u>7/13/87</u> Date (Effective Date) <u>7/17/87</u> Date																									
<small>*Justification required in comment section. **Required within 45 days of effective date or work stops. ***30 day minimum required between draft and final report.</small>																										

Revised: March 1, 1987

Sheet 1 White - Contracting Officer Copy (Washington, D.C.), Sheet 2 Green - Project Office Copy (Washington, D.C.), Sheet 3 Canary - Contractor Copy  
 Sheet 4 Pink - Acknowledge Copy, Sheet 5 Goldenrod - Finance Office/RTP, Photocopies to: Regional Contact, Primary Contact, and Regional Coordinator

3  
copies



## TES IV - SCOPE OF WORK

Colbert Landfill  
Spokane, Washington

Purpose:

The purpose of this work assignment is to support the EPA Region 10 Project Manager by analyzing information which would identify additional Potentially Responsible Parties (PRPs).

Background:

Colbert Landfill is a 40 acre sanitary landfill located about 15 miles north of Spokane, Washington. The site has been owned and operated by Spokane County since it was opened in 1968. During the period 1975 to 1980, a local electronics firm, Key Tronic Corporation, disposed spent solvent, composed of a mixture of methylene chloride and 1,1,1-trichloroethane (TCA), at a rate of several hundred gallons per month. The spent solvents were dumped as liquids into the exposed trenches and allowed to mix with soils and refuse already in the trench.

Once the disposal practice was identified and stopped, several adjacent domestic wells were sampled. TCA was identified in several of the wells with concentrations as high as 24,000 ug/l (ppb). This level was above the SNARL (Suggested No Adverse Response Level) and the local Department of Ecology (Ecology) recommended against consumptive uses.

An RI/FS for this site has been completed and the decision on what type of remedial action will be made by September 1987.

Work to be Performed:

The TES IV contractor will assist the Region 10 Project Manager in the identification of Potentially Responsible Parties (PRPs). *and shall perform the RPS in accordance with the EPA written guidance for conducting Responsible Party Searches*

The owner/operator, Spokane County, and a disposer at the site, Key Tronic Corporation, have been tentatively identified as PRPs. Fairchild A.F.B. has been indicated as a possible candidate. There is a possibility that other persons have contributed to the groundwater pollution at Colbert.

The TES IV contractor will use file information, interviews, landfill records, etc., to develop sufficient information to allow EPA to identify additional PRPs for the Colbert Landfill site.

The deliverable will be the recommendation and supporting documentation which will allow EPA to make a decision on the status of PRPs.

The TES IV contractor will be under the direction of the EPA Region 10 Project Manager. The level of effort anticipated is 200 hours and will end September 30, 1987.

N.Thompson CJF 6/23/87 0778P



TES II - J10 - 0439 - A1 - 0002

# **ENVIRONMENTAL PROTECTION AGENCY** **Technical Enforcement Support at Hazardous Waste Sites**

<b>APPROPRIATION:</b> <input checked="" type="checkbox"/> CERCLA <input type="checkbox"/> RCRA <input type="checkbox"/> Other Funding Acct. No. _____	<b>TES NO.</b> <u>4</u> Contract No. <u>68-01-7351</u> Prime Contractor Name <u>Jacobs Engineering</u>	<b>WORK ASSIGNMENT NO.</b> <u>439</u> <input type="checkbox"/> Original <input checked="" type="checkbox"/> Amendment No. <u>1</u> Priority: <input type="checkbox"/> Normal <input type="checkbox"/> Expedite* <input type="checkbox"/> Emergency*
<b>SITE/FACILITY:</b> <u>Colbert Landfill</u> <u>Spokane County</u> <u>WA</u> <u>10</u> <small>or Project Name Site/Facility Location (City or County) State Region/HQ</small> NPL Site: <input checked="" type="checkbox"/> Final or Proposed List <input type="checkbox"/> No RCRA Facility: <input type="checkbox"/> Yes <input type="checkbox"/> No Facility ID# _____ Site Acct. #: <u>0501</u> SCAP Activity Link: <u>013</u>		
<b>PURPOSE:</b> <input type="checkbox"/> Initiate New Work Assignment <input checked="" type="checkbox"/> Work Plan Approval** <input type="checkbox"/> Disapprove Work Plan (Contractor will immediately stop work) <input type="checkbox"/> Work Plan Revision: ( <input type="checkbox"/> SOW <input type="checkbox"/> Cost/Hours) <input type="checkbox"/> Closeout Work Assignment (All final deliverables received)		
<b>STATEMENT OF WORK SUMMARY (SOW)</b> (Attach a <u>Detailed</u> SOW) (See Reporting Requirements): Task Type <u>PKP Search</u> Task No.: <u>1</u> <small>(Must identify task type and number according to TES User's Guide to show activity is within the overall TES contract SOW)</small> Summary/Comments: _____		
<b>BASE PERIOD</b> Previously Approved <u>(b) (4)</u> <u>(b) (4)</u> This Action <u>1-95</u> <u>1-95</u> Total _____	<b>OPTION PERIOD</b> <small>(Authorized only if contract option is exercised)</small> Previously Approved <u>(b) (4)</u> <u>(b) (4)</u> This Action <u>1-95</u> <u>1-95</u> Total _____	TES II: Use Option Column TES III & IV: Base period ends 9/30/87. Any work required after that date should appear in option column.
<b>PERIOD OF PERFORMANCE</b> From: Effective date below To: <u>9/30/87</u> <small>(closeout date not to exceed September 30, 1987)</small>	<b>PERIOD OF PERFORMANCE</b> From: <u>10/1/87</u> To: <u>12/15/87</u> (Closeout date)	
<small>(Do not include clerical or Expert Witness hours in the LOE estimate. Expert Witness costs are considered "Other Direct Costs." Estimate the Expert Witness hours in the attached Scope of Work.)</small>		
No. of Pages to Follow _____ Reference Info.: <input type="checkbox"/> Attached <input type="checkbox"/> Transmitted Separately <input type="checkbox"/> Pickup From _____ <small>(Including SOW)</small>		
<b>REPORTING REQUIREMENTS:</b> <input type="checkbox"/> Briefing(s) <input checked="" type="checkbox"/> Letter Report <input type="checkbox"/> Draft Report <input type="checkbox"/> Final Report*** <input type="checkbox"/> Other Deliverables are to be marked ENFORCEMENT CONFIDENTIAL: <input type="checkbox"/> Yes <input type="checkbox"/> No <small>Reporting requirements and deliverables may differ for each TES contract. Include in the SOW a schedule for deliverables. If the number of reports required for your deliverables differs from the contract's normal requirement, request that in your SOW.</small>		
<b>INITIATOR:</b> <u>Neil Thompson, Region 10, HW-113</u> Primary Contact <u>1200 6th Ave., Seattle, WA 98101</u> Address	<u>8/25/87</u> Date <u>399-7177 (206) 442-7177</u> Phone no. <u>FTS</u> <u>Off-NET</u>	_____ Date
<b>CONCURRENCE:</b> <u>Kathryn M. Davidson</u> Regional Contact		_____ Date
<b>APPROVAL:</b> _____ Project Officer (HQ TES P.O.) <u>[Signature]</u> Contracting Officer		_____ Date <u>[Signature]</u> Date (Effective Date)
<b>CONTRACTOR ACKNOWLEDGEMENT OF RECEIPT:</b> <u>[Signature]</u> Signature and Title <u>[Signature]</u> Date		
<small>*Justification required in comment section. **Required within 45 days of effective date or work stops. ***30 day minimum required between draft and final report.</small>		

Revised: March 1, 1987



TES4-510-0439-A1-0003  
ENVIRONMENTAL PROTECTION AGENCY  
Technical Enforcement Support at Hazardous Waste Sites

REGION X

OCT 08 1987

<b>APPROPRIATION:</b> <input checked="" type="checkbox"/> CERCLA <input type="checkbox"/> RCRA <input type="checkbox"/> Other  Funding Acct. No. _____	<b>TES NO.</b> IV Contract No. 68-01-7351 Prime Contractor Name Jacobs	<b>WORK ASSIGNMENT NO.</b> See Attached <input type="checkbox"/> Original <input checked="" type="checkbox"/> Amendment No. See Attached Priority: <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Expedite* <input type="checkbox"/> Emergency
<b>SITE/FACILITY:</b> <u>See Attached</u> <small>or Project Name</small>  NPL Site: <input type="checkbox"/> Final or Proposed List <input type="checkbox"/> No RCRA Facility: <input type="checkbox"/> Yes <input type="checkbox"/> No Facility ID# _____  <b>PURPOSE:</b> <u>Authorize performance into option period</u> <input type="checkbox"/> Initiate New Work Assignment <input type="checkbox"/> Work Plan Approval** <input type="checkbox"/> Disapprove Work Plan (Contractor will immediately stop work) <input type="checkbox"/> Work Plan Revision <input type="checkbox"/> Revised WP Approval <input type="checkbox"/> Closeout Work Assignment (All final deliverables received)		
<b>STATEMENT OF WORK SUMMARY (SOW)</b> (Attach a Detailed SOW) (See Reporting Requirements): Task Type _____ Task No.: _____ <small>(Must identify task type and number according to TES User's Guide to show activity is within the overall TES contract SOW)</small> Summary/Comments: <u>This amendment supercedes all previous amendments correcting dollars and hours for base and option period.</u>		
<b>BASE PERIOD</b>  Previously Approved _____ This Action _____ Total <u>(b) (4)</u> <u>(b) (4)</u>  <b>PERIOD OF PERFORMANCE</b> From: Effective date below <u>10-1-86</u> To: <u>9-30-87</u> <small>(closeout date not to exceed base period ending date)</small>	<b>OPTION PERIOD</b> <small>(Authorized only if contract option is exercised)</small>  Previously Approved _____ This Action _____ Total <u>(b) (4)</u> <u>(b) (4)</u>  <b>PERIOD OF PERFORMANCE</b> From: <u>10-1-87</u> To: <u>9-30-88</u> (Closeout date)	TES II: Use Option Column TES III & IV: Base period ends 9/30/87. Any work required after that date should appear in option column.
<small>(Do not include clerical or Expert Witness hours in the LOE estimate. Expert Witness costs are considered "Other Direct Costs." Estimate the Expert Witness hours in the attached Scope of Work.)</small>		
No. of Pages to Follow _____ Reference Info.: <input type="checkbox"/> Attached <input type="checkbox"/> Transmitted Separately <input type="checkbox"/> Pickup From _____		
<b>REPORTING REQUIREMENTS:</b> <input type="checkbox"/> Briefing(s) <input type="checkbox"/> Letter Report <input type="checkbox"/> Draft Report <input type="checkbox"/> Final Report*** <input type="checkbox"/> Other Deliverables are to be marked ENFORCEMENT CONFIDENTIAL: <input type="checkbox"/> Yes <input type="checkbox"/> No <small>Reporting requirements and deliverables may differ for each TES contract. Include in the SOW a schedule for deliverables. If the number of reports required for your deliverables differs from the contract's normal requirement, request that in your SOW.</small>		
<b>INITIATOR:</b> _____ Primary Contact _____ Date _____ Address _____ Phone no. _____ FTS _____ Off-NET _____		
<b>CONCURRENCE:</b> _____ Regional Contact _____ Date _____		
<b>APPROVAL:</b> <u>[Signature]</u> _____ Project Officer (HQ TES P.O.) _____ Date <u>9/30/87</u> <u>[Signature]</u> _____ Contracting Officer _____ Date <u>9/30/87</u> (Effective Date)		
<b>CONTRACTOR ACKNOWLEDGEMENT OF RECEIPT:</b> <u>[Signature]</u> _____ Signature and Title _____ Date <u>10/5/87</u>		
*Justification required in comment section. **Required within 45 days of effective date or work stops. ***30 day minimum required between draft and final report.		

Revised: March 1, 1987

TECHNICAL ENFORCEMENT SUPPORT CONTRACT 68-01-7351

The purpose of this amendment to the attached work assignments is to (1) extend the period of performance of each work assignment into FY 1988 and, (2) authorize costs to be expended during Option Period I, beginning on October 1, 1987.

All work assignments on the attached list(s) are hereby modified through this action. Next to the work assignment number is the amendment number of that work assignment, the site/facility name, the approved base period dollar amount and LOE, the approved option period dollar amount and LOE and the total work assignment dollar amount and LOE. All specified dollar amounts include fee.

The Contractor is required to submit a revised work plan only if the level of effort and/or authorized dollar amounts, when added to the LOE and/or cost incurred under the base period, exceed the LOE and/or cost approved in the work plan for that work assignment. A revised work plan may also be necessary if significant technical or scheduling changes have occurred since the work plan was approved.

The Contractor shall add the amendment number for each work assignment to the attached list(s) before returning a copy of the attached list(s) with his signed acknowledgement.



## TES IV REGION X FY87 YEAR END WA AMENDMENTS

W.A CERCLA/ NO. RCRA	SITE	REGION NO.	BASE LOE HOURS	BASE \$	OPTION LOE HOURS	OPTION \$	BASE+OPTION LOE HOURS	BASE+OPTION \$
22 CERCLA SOUTH TACOMA CHEMICAL		10	(b) (4) 1-95					
23 CERCLA WYCKOFF/SEGAL		10						
46 CERCLA HARBOR ISLAND		10						
87 CERCLA WYCKOFF-EAGLE HARBOUR		10						
125 CERCLA SOUTH TACOMA CHANNEL		10						
136 CERCLA WESTERN PROCESSING		10						
140 CERCLA AMERICAN CROSSARM & CONDUIT		10						
146 CERCLA SOUTH TACOMA SWAMP		10						
219 CERCLA TELEDYNE WAH CHANG ALBANY		10						
220 CERCLA PACIFIC HIDE AND FUR		10						
225 CERCLA FRONTIER HARD CHROME		10						
279 CERCLA SOUTH TACOMA CHANNEL		10						
280 CERCLA SOUTH TACOMA CHANNEL		10						
322 CERCLA HARBOR ISLAND		10						
347 CERCLA BUNKER HILL		10						
410 CERCLA ASARCO		10						
439 CERCLA COLBERT LANDFILL		10						
445 CERCLA FMC-YAKIMA		10						
456 CERCLA BUNKER HILL		10						
457 CERCLA BUNKER HILL		10						
495 CERCLA		10						
496 CERCLA		10						
499 CERCLA		10						
516 CERCLA		10						
			11630	591511	9161	566045	20791	1,157,556



TESTIV-J10-0439-A1-0004  
**ENVIRONMENTAL PROTECTION AGENCY**  
Technical Enforcement Support at Hazardous Waste Sites

**RECEIVED  
REGION X**

<b>APPROPRIATION:</b> <input checked="" type="checkbox"/> CERCLA <input type="checkbox"/> RCRA <input type="checkbox"/> Other  Funding Acct. No. _____		<b>TES NO.</b> <u>4</u> Contract No. <u>68-01-7351</u> Prime Contractor Name <u>Jacobs</u>		<b>WORK ASSIGNMENT NO.</b> <u>439</u> <input type="checkbox"/> Original <input checked="" type="checkbox"/> Amendment No. <u>3</u> Priority: <input type="checkbox"/> Normal <input type="checkbox"/> Expedite <input type="checkbox"/> Emergency	
<b>SITE/FACILITY:</b> <u>Colbert Landfill</u> <small>or Project Name</small>		<u>Spokane County</u> <b>Site/Facility Location (City or County)</b>		<u>WA</u> <u>10</u> <b>State Region/HQ</b>	
NPL Site: <input checked="" type="checkbox"/> Final or Proposed List <input type="checkbox"/> No RCRA Facility: <input type="checkbox"/> Yes <input type="checkbox"/> No Facility ID# _____		Site Acct. #: <u>0B01</u>		SCAP Activity Link: <u>013</u>	
<b>PURPOSE:</b> <input type="checkbox"/> Initiate New Work Assignment <input type="checkbox"/> Work Plan Approval** <input type="checkbox"/> Disapprove Work Plan (Contractor will immediately stop work) <input type="checkbox"/> Work Plan Revision: ( <input type="checkbox"/> SOW <input type="checkbox"/> Cost/Hours) <input checked="" type="checkbox"/> Closeout Work Assignment (All final deliverables received)					
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<b>BASE PERIOD</b>  Previously Approved <u>LOE</u> <u>Cost/Fee</u> This Action <u>(b) (4) 1-95</u> Total _____		<b>OPTION PERIOD</b> <small>(Authorized only if contract option is exercised)</small>  Previously Approved <u>LOE</u> <u>Cost/Fee</u> This Action <u>(b) (4) 1-95</u> Total _____		TES II: Use Option Column TES III & IV: Base period ends 9/30/87. Any work required after that date should appear in option column.	
<b>PERIOD OF PERFORMANCE</b> From: Effective date below To: _____ <small>(closeout date not to exceed September 30, 1987)</small>		<b>PERIOD OF PERFORMANCE</b> From: _____ To: <u>December 15, 1988</u> (Closeout date) <u>February</u>			
<small>(Do not include clerical or Expert Witness hours in the LOE estimate. Expert Witness costs are considered "Other Direct Costs." Estimate the Expert Witness hours in the attached Scope of Work.)</small>					
No. of Pages to Follow <u>0</u> Reference Info.: <input type="checkbox"/> Attached <input type="checkbox"/> Transmitted Separately <input type="checkbox"/> Pickup From _____ (Including SOW)					
<b>REPORTING REQUIREMENTS:</b> <input type="checkbox"/> Briefing(s) <input type="checkbox"/> Letter Report <input type="checkbox"/> Draft Report <input type="checkbox"/> Final Report*** <input type="checkbox"/> Other Deliverables are to be marked ENFORCEMENT CONFIDENTIAL: <input type="checkbox"/> Yes <input type="checkbox"/> No <small>Reporting requirements and deliverables may differ for each TES contract. Include in the SOW a schedule for deliverables. If the number of reports required for your deliverables differs from the contract's normal requirement, request that in your SOW.</small>					
<b>INITIATOR:</b> <u>Neil Thomson, HW-113</u> Primary Contact <u>1200 Sixth Ave, Seattle, 98101</u> Address  Phone no. <u>399-7177</u> <u>(206) 442-7177</u> FTS Off-NET					
<b>CONCURRENCE:</b> <u>Kathryn M. Davidson</u> Regional Contact  Date _____					
<b>APPROVAL:</b> _____ Project Officer (HQ TES P.O.)  _____ Contracting Officer  _____ Signature and Title					
<b>CONTRACTOR ACKNOWLEDGEMENT OF RECEIPT:</b>  _____ Signature and Title  _____ Date					
<div style="display: flex; justify-content: space-between;"><div><small>*Justification required in comment section.</small></div><div><small>**Required within 45 days of effective date or work stops.</small></div><div><small>***30 day minimum required between draft and final report.</small></div></div>					



FEB 4 1988  
Date  
(Effective Date)